Fill i	n this information to identify your case:			lirected in this form and in	Form				
Deb	tor 1 Larry Steffee		22A-1Supp:						
	tor 2se, if filing)		■ 1. There is no pres	umption of abuse					
Unite	ed States Bankruptcy Court for the: Northern District of	of Ohio	applies will be n	to determine if a presumpt nade under <i>Chapter 7 Me</i>					
Case	e number 22-50323		Calculation (Off	icial Form 122A-2).					
(if kno	wn)			does not apply now becay service but it could apply					
			☐ Check if this is a	n amended filing					
Off	icial Form 122A - 1								
Ch	apter 7 Statement of Your Cui	rrent Monthly In	come		12/19				
attach case	complete and accurate as possible. If two married people is a separate sheet to this form. Include the line number to unumber (if known). If you believe that you are exempted froging military service, complete and file Statement of Exempter. 1: Calculate Your Current Monthly Income	vhich the additional information m a presumption of abuse beca	applies. On the top of a suse you do not have prir	ny additional pages, write y marily consumer debts or be	our name and ecause of				
1.	What is your marital and filing status? Check one or	nly.							
	■ Not married. Fill out Column A, lines 2-11.								
	☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.								
	☐ Married and your spouse is NOT filing with you. You and your spouse are:								
	☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.								
	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evading	out Column A, lines 2-11; do r egally separated under nonba	not fill out Column B. By ankruptcy law that appli	checking this box, you dees or that you and your sp					
10 th	Il in the average monthly income that you received from all 01(10A). For example, if you are filing on September 15, the 6-ne 6 months, add the income for all 6 months and divide the total ouses own the same rental property, put the income from that property.	nonth period would be March 1 thre I by 6. Fill in the result. Do not incl	ough August 31. If the amoude any income amount m	ount of your monthly income voore than once. For example,	varied during if both				
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse					
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).		\$1,009.27	\$					
	 Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 		\$0.00	\$					
4.	4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.								
5.	Net income from operating a business, profession,	or farm							
		Debtor 1							
	Gross receipts (before all deductions)	\$ 0.00							
	Ordinary and necessary operating expenses	-\$ 0.00		•					
	Net monthly income from a business, profession, or far	m \$ 0.00 Copy here -	>\$	\$					
6.	Net income from rental and other real property	Delete a 4							
		Debtor 1							
	Gross receipts (before all deductions)	\$ 0.00							
	Ordinary and necessary operating expenses	-\$ <u>0.00</u>	·	Φ.					
1	Net monthly income from rental or other real property	\$ 0.00 Copy here -	> \$ 0.00	\$					

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7. Interest, dividends, and royalties

0.00

Debtor 1 Larry Steffee			nber (<i>if known</i>)	22-50323	
		Column Debtor		Column B Debtor 2 or non-filing spouse	
8.	Unemployment compensation	\$	0.00	\$	
	Do not enter the amount if you contend that the amount received was a benefit und the Social Security Act. Instead, list it here:	der			=
	For you \$ 0.00				
	For your spouse\$				
9.	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.		0.00	\$	
10.	Income from all other sources not listed above. Specify the source and amount Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by t United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below				
	·	\$	0.00	\$	_
		\$	0.00	\$	_
	Total amounts from separate pages, if any.	+ \$	0.00	\$	_
11. Part	Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. \$	1,009.27		Tota inco	1,009.27
	Calculate your current monthly income for the year. Follow these steps:				
12.	12a. Copy your total current monthly income from line 11	Co	opy line 11 h	nere=> \$	1,009.27
	Multiply by 12 (the number of months in a year)		x 12		
	12b. The result is your annual income for this part of the form			12b. \$	12,111.24
13.	Calculate the median family income that applies to you. Follow these steps:				
	Fill in the state in which you live.				
	Fill in the number of people in your household.				
	Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specific for this form. This list may also be available at the bankruptcy clerk's office.	ed in the sep	arate instruc	13. \$	52,415.00
14.	How do the lines compare?				
	14a. Line 12b is less than or equal to line 13. On the top of page 1, check to Go to Part 3. Do NOT fill out or file Official Form 122A-2.		•		1224 2
Part	 14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The</i> Go to Part 3 and fill out Form 122A–2. 3: Sign Below 	presumption	oi abuse is i	ивтенниней ву гогт	1
લા	By signing here, I declare under penalty of perjury that the information on this	statement a	nd in any atto	achments is true and	correct
		siaicinicili di	nu iii aiiy alla	aciments is true affu	ooneol.
	X /s/ Larry Steffee				
	Larry Steffee Signature of Debtor 1				

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2

Date March 3, 2022

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income